

Improving Washington State's Adult Abuse Response System

The Abuse/Neglect of Adults Who Are Vulnerable Study Group

Susan Dreyfus, Secretary
Department of Social and Health Services
September 15, 2010



For more information about Washington State's Adult Abuse/Neglect Response System, please contact:

Aging and Disability Services Administration

P.O. Box 45600

Olympia, WA 98504-5600

1-800-422-3263

<http://www.adsa.dshs.wa.gov>

Acknowledgements

We would like to thank the following people representing community and state service and advocacy groups, for their dedication and commitment to this project. Their contributions will help improve Washington State's response system for older adults and people with disabilities that experience abuse, abandonment, neglect, self-neglect or financial exploitation.

Abuse/Neglect of Adults Who Are Vulnerable Study Group Members and Contributing Partners

George Adams
Self Advocates in Leadership (SAIL)
george6360@gmail.com

Katherine Ander
Residential Care Services
Katherine.ander@dshs.wa.gov

Fran Bessermin
State Council on Aging
fbessermin@msn.com

Shirley Bondon
Office of Public Guardianship
Shirley.bondon@courts.wa.gov

Don Clintsman
Division of Developmental Disabilities
Aging & Disability Services Admin
donald.clintsman@dshs.wa.gov

Donna Cobb
Attorney General's Office
donna.cobb@atg.wa.gov

Dawn Cortez
Attorney General's Office
dawn.cortez@atg.wa.gov

Susan N. Dreyfus, Secretary
Department of Social & Health Services
Susan.Dreyfus@dshs.wa.gov

Sue Elliott
Arc of Washington
sue@arcwa.org

Craig Fredrickson
Adult Family Home Provider
Craigjan2@comcast.net

Jackie Heinselman
Home & Community Services, Region 6
Jackie.heinselman@dshs.wa.gov

Ed Holen
DD Planning Council
Ed.Holen@ddc.wa.gov

Chris Imhoff
Home & Community Services Division
Aging & Disability Services Admin
chris.imhoff@dshs.wa.gov

Cathy Hoover
Attorney General's Office
catherine.hoover@atg.wa.gov

Susan Kas
Disability Rights Washington
susanK@dr-wa.org

Trent Kelly
Department of Health
trent.kelly@doh.wa.gov

Connie Kline
Pierce County Aging & Long Term Care
ckline@co.pierce.wa.us

Pat Lashway, Facilitator
Office of the Secretary
Department of Social & Health Services
patricia.lashway@dshs.wa.gov

Dave Knutson
House Health Care and Wellness
dave.knutson@leg.wa.gov

Joyce LaValle
American Association of Retired Persons
(AARP)
joycelavalle@gmail.com

Kathy Leitch, Chair
ADSA Assistant Secretary
Department of Social & Health Services
Kathy.Leitch@dshs.wa.gov

Lori Melchiori
Residential Care Services Division
Aging & Disability Services Admin
lori.melchiori@dshs.wa.gov

David Lord
Disability Rights Washington
davidl@dr-wa.org

Marty Lovinger
Office of Financial Management
marty.lovinger@ofm.wa.gov

Ingrid McDonald
AARP Washington
imcdonald@aarp.org

Terry Marker
Home & Community Services Division
Aging & Disability Services Admin
terry.marker@dshs.wa.gov

Bill Moss
Home & Community Services Division
Aging & Disability Services Admin
bill.moss@dshs.wa.gov

Peter Nazzal
Catholic Community Services
petern@ccsww.org

Toby Olson
Governor's Committee on Disability Issues
and Employment
toby.olson@esd.wa.gov

Larita Paulsen
Residential Care Services Division
Aging & Disability Services Admin
larita.paulsen@dshs.wa.gov

Leo Poort
WA Association of Sheriffs and Police Chiefs
leopoort@gmail.com

Louise Ryan
WA State LTC Ombudsman
louiser@multi-servicecenter.com

Linda Rolfe
Division of Developmental Disabilities
Aging & Disability Services Administration
linda.rolfe@dshs.wa.gov

Shaw Seaman
Division of Developmental Disabilities
Aging & Disability Services Admin
shaw.seaman@dshs.wa.gov

Carol Sloan
Adult Protective Services
Aging & Disability Services Admin
carol.sloan@dshs.wa.gov

Joyce Stockwell
Residential Care Services Division
Aging & Disability Services Admin
joyce.stockwell@dshs.wa.gov

Betty Schwieterman
Disability Rights Washington
bettys@dr-wa.org

Page Ulrey
King County Prosecutor's Office
page.ulrey@kingcounty.gov

Kathy Van Olst
King County Prosecutor's Office
kathy.vanolst@kingcounty.gov

Aaron Van Valkenburg
Pierce County Aging & Long Term Care
avanval@co.pierce.wa.us

Steve Weaver
Human Service Director, Suquamish Tribe
sweaver@suquamish.nsn.us

Table of Contents

Acknowledgements	3
Table of Contents	5
Executive Summary.....	7
Washington State’s Current Adult Protection System	11
Adult Protective Services: Investigations and Protective Services to Adults who live in their Own Homes.....	11
Residential Care Services Division: Investigations in Residential Facilities and Supported Living Settings	12
Abuse/Neglect of Adults who are Vulnerable Study Group – Process Overview	13
Survey of Eight States’ Abuse/Neglect Response Systems	14
Survey of Advocacy Groups	16
Funding	16
Abuse/Neglect of Adults who are Vulnerable Study Group’s Top Final Recommendations	18
Additional Recommendations for Future Consideration.....	22
Appendix	25

Executive Summary

Washington State is experiencing a growing population of adults who are vulnerable with complex needs. This parallels with the predicted increase in the 65+ population.¹ The elderly population alone is forecasted to represent one-fifth of Washington State's total population in 2030.² With decreasing state and community resources, Washington State's adult abuse and neglect response system is challenged to meet the needs of those adults who are vulnerable and experience abuse and neglect at the hands of others.

Recognizing that identification, prevention and response to abuse and neglect against older adults or people with disabilities is dependent upon community partnerships, Susan Dreyfus, Secretary of the Department of Social and Health Services (DSHS), convened a group of community advocates to address the need for continuous improvement of the abuse and neglect response system for adults who are vulnerable in Washington State. In addition, the Department funded the National Association of States United for Aging and Disabilities (NASUAD),³ to survey eight states similar to Washington State in population, government structure, and long-term care systems.

The group was charged⁴ to:

- Research and discuss practices identified by the group that impact the quality and capacity of our system;
- Identify what practices other states have found effective;
- Recommend system and program changes;
- Explore statutory changes necessary for implementation of recommendations;
- Identify resource and funding opportunities such as the Elder Justice Act and Health and the Patient Protection and Affordable Care Act (PPACA – Health Care Reform); and
- Recommend actions for informing and empowering consumers.

In six meetings from April to August 2010, the Abuse/Neglect of Adults who are Vulnerable Study Group compared and contrasted Washington State's current adult abuse response system with information provided in the survey of eight states. To obtain a broader community perspective, study group members also surveyed select advocacy groups in the same states, including Ombudsman and Independent Living Center programs.

¹ *Forecast of the Population, Office of Financial Management, Washington State, November 2009, p. 8.*

² *Ibid, p. 8.*

³ NASUAD, founded in 1964, provides leadership in the promotion of social policy regarding older adults and individuals with disabilities on the national level for 56 designated state and territorial agencies on aging.

⁴ Abuse/Neglect of Adults who are Vulnerable Study Group Charter, Appendix.

After extensive analysis of all information, the study group prioritized and finalized its list of recommendations for the improvement of Washington State's adult protection system. The group included recommendations that could be implemented within current budget constraints and limited resources and those that would require new resources:

Top Recommendations

1. Replace and integrate antiquated Adult Protective Services (APS) and Residential Care Services (RCS) databases to improve accuracy, accountability, program and individual outcome tracking, and information sharing.
2. For investigations to be effective, they must be timely, thorough, and person-centered. The response system needs additional complaint investigators and access to medical and financial forensic expertise.
3. The first line of defense against abuse, neglect, or exploitation is to ensure that potential victims know how to respond to such abuse, feel confident in what they can do, and know that they will not be further victimized by reporting the problem. Developing legislation and, where necessary, regulations, that address victim rights and educating adults who are vulnerable about their rights is crucial to reducing abuse, neglect, and exploitation.
4. Develop training on abuse identification, prevention, risk reduction and incident response. Training should be provided to mandated reporters, oversight entities (law enforcement, APS, RCS, etc.), individuals who are vulnerable, families, service providers, and to the community at-large.
5. Make resources available to meet immediate needs for housing and in-home supports in emergency situations. Include the potential use of a 24/7 mobile response team to provide initial stabilization. Establish linkages to existing resources. Look to the domestic violence response system for additional solutions.
6. Institute time-limited case management based on a person-centered risk assessment and safety plan.
7. Strengthen the incident referral and investigation connection between RCS/APS and law enforcement and provide a systemic solution for updating incident related information between the entities. These enhancements will improve response consistency, and ensure compliance with the statutory requirement that all cases that may be criminal are reported to law enforcement.
8. Support a statewide coalition comprised of stakeholders in the adult abuse/neglect response system (e.g., long-term care ombudsman, Medicaid Fraud Control Unit, Disability Rights Washington, DSHS, DOH, etc.) to assure the accountability of all systems involved related to the efforts of the study group, and to assess the need for other reforms.

Additional Recommendations for Future Consideration

1. Create standardized training for law enforcement across the state. Include:
 - a. Department investigative roles
 - b. Vulnerable adult abuse, neglect and financial exploitation
 - c. Failure to report is a crime
 - d. Crimes in LTC facilities and in-home, especially criminal mistreatment
2. Increase community education and media events to promote zero tolerance of abuse/neglect against adults who are vulnerable.
3. Consider with regard to implementation of Recommendation #7:
 - a. A standard referral form
 - b. Assigning a designated priority to a case when making a law enforcement referral
 - c. Immediate referral of all reports alleging neglect, criminal mistreatment, and theft
 - d. Immediate reporting of additional information
 - e. Provide incident outcome reports to law enforcement
4. Propose civil remedies and expand the range for sanctions for those mandated reporters who fail to report.
5. Develop legislation to require mandated reporters to report directly to law enforcement for increased timeliness of reporting.
6. Expand the list of mandated reporters to include clergy, funeral directors, notaries, and financial institution employees.
7. Develop a single ADSA standard for RCS/APS complaint responses that includes prioritization criteria and response times.
8. Consider a centralized ADSA intake system.
9. Furnish protective services staff with assessment tools.
10. Improve timeliness of investigations by shortening required response times for reports prioritized as emergencies.
11. Make information about caregiver qualifications easily accessible to adult Medicaid and non-Medicaid recipients.
12. Reconsider the permanency of names on the abuse registry; create a range of disqualifying timelines.

13. Address the victim credibility gap through training of administrative law judges and superior court judges. Consider including training on the provision of reasonable accommodations from the first contact with the victim.
14. Develop a pool of expert witnesses and advocates to assist in victimization case development and presentation.
15. Outreach to prosecutors in rural areas to treat crimes against elders and people with disabilities with equal priority (e.g., financial exploitation situations).

Washington State's Current Adult Protection System

Aging and Disability Services Administration (ADSA) implements the department's statutory mandate⁵ to investigate allegations of abuse, abandonment, neglect, self-neglect, and financial exploitation of adults who are vulnerable. The entities responsible to carry out this function are Adult Protective Services (APS) and Residential Care Services (RCS), both housed within ADSA.

Adult Protective Services: Investigations and Protective Services to Adults who live in their Own Homes

APS is a program within the Home and Community Services Division (HCS) of ADSA. APS staff in six regions statewide, receive and investigate reports of abuse (physical, mental, sexual, and exploitation of a person), abandonment, neglect, self-neglect, and financial exploitation of adults who are vulnerable living in their own homes and in facilities where there is an allegation of mistreatment by someone outside the facility. APS screens reports against statutory criteria and prioritizes them based upon the potential of immediate harm to the alleged victim. Prioritized responses are "high (24 hour response)," "medium (5 working day response)," and "low (10 working day response)".

APS conducts investigations at no charge and without regard to the income of the alleged victim, and can provide protective services with the alleged victim's consent. Services can include helping an adult who is vulnerable with a protection order, providing referrals for legal assistance, in-home care services, long-term care residential services, and other community services. APS may pursue guardianships for those adults with diminished capacity.

APS routinely coordinates investigation and protective services activities with law enforcement, fire department personnel, case managers, and other community partners related to an investigation. APS also collaborates with other community organizations through Regional Resource Teams that coordinate responses to complex situations.

APS makes a 'substantiated finding' against persons found to have abused, abandoned, neglected, or financially exploited an adult who is vulnerable, based upon a preponderance of evidence. Such persons have a right to challenge the substantiated finding in an administrative hearing. If APS prevails in the hearing, persons with a final finding of abuse, abandonment, neglect or financial exploitation are submitted to a department database and disqualified from being employed in any long-term care setting or obtaining a license or certification to operate a long-term care facility or program.

⁵ Revised Code of Washington 74.34

Residential Care Services Division: Investigations in Residential Facilities and Supported Living Settings

RCS is responsible for provider/facility licensure or certification as well as investigating reports of abuse, abandonment, neglect, and financial exploitation of adults who are vulnerable living in long-term care facilities and supported living. The centralized Complaint Resolution Unit screens reports against statutory criterion, and prioritizes these reports for a range of 2-day to 90-day response times. Investigators in each of six statewide regions interview, observe, and review facility records to determine if the facility complied with long-term care licensing regulations.

RCS may take enforcement actions ranging from requiring the licensee to pay a civil fine to the permanent removal of a license, which the facility can appeal.

The Resident and Client Protection Program (RCPP) within RCS investigates individuals alleged to have abused, abandoned, neglected, exploited, and financially exploited a resident or client in the following programs:

- Nursing homes
- Boarding homes
- Adult family homes
- Intermediate care facilities for persons with mental retardation, and
- Certified community residential services and support

RCS and APS coordinate investigations when a situation involves an adult who is vulnerable that lives in a residential facility and the alleged perpetrator is not affiliated with the facility. If RCS moves to close a facility because of resident safety or other issues, APS and HCS staff will assist in the relocation of residents to other facilities or the person's own home, and arranging individual or agency provider services.

Investigators make a finding based upon a preponderance of the evidence. Persons found to have abused, abandoned, neglected, exploited, or financially exploited residents or clients in the above programs can challenge the finding in an administrative hearing. If RCS prevails in the hearing, the name of the person is submitted to a department database and the person is disqualified from being employed in any long-term care setting or obtaining a license or certification to operate a long-term care facility or program.

Abuse/Neglect of Adults who are Vulnerable Study Group – Process Overview

Because all citizens play a vital role in the identification and prevention of abuse and neglect against adults who are vulnerable, Secretary Dreyfus requested that group participants consist of a broad representation of community members, Tribal Nations, the legal community, DSHS staff, mandatory reporters, advocates, the long term care ombudsman, service providers, regulators, and members of law enforcement. The group convened in April 2010 with September 15, 2010 as a deadline for its report.

The group's charge included:

- Research and discuss practices identified by the group that impact the quality and capacity of our system
- Identify what practices other states have found effective
- Recommend system and program changes
- Explore statutory changes necessary for implementation of recommendations
- Identify resource and funding opportunities such as the Elder Justice Act and Health and the Patient Protection and Affordable Care Act (PPACA – Health Care Reform)
- Recommend actions for informing and empowering consumers

The group began its work by identifying current barriers/issues to the protection of adults who are vulnerable:

- Lack of information sharing – even among state employees doing the same thing
- Lack of resources/training
- More complicated cases involving legal and financial issues
- Lack of consistent risk assessment related to capacity issues
- The standard for substantiation (preponderance) is not well understood
- Difficulty in obtaining documents from financial institutions
- Lack of resources for direct support services, quality housing options
- Untimely feedback on status of investigations
- Need for more sophisticated electronic systems to support more reliable data
- Empowered consumers – shouldn't be afraid to report
- Solutions that involve the community – not just a government issue
- More independent system – now state employees investigate state contractors
- Duplication of investigatory activity between state and providers
- Need to create a climate of intolerance of abuse/neglect
- Fear of exposing problems in system leads to lack of good analysis

The group organized the barriers/issues into ‘themes’:

- May: Climate of zero tolerance
- June: Funding and resources
- July: System barriers – improving information sharing
- August: Consultant’s interim report

During each meeting, the study group drafted and added to their list of recommendations within the above framework.

ADSA contracted with the National Association of States United for Aging and Disabilities (NASUAD)⁶ to survey the protection systems of eight states, including Washington State. The researcher on the project was Maria Greene, NASUAD’s senior consultant who provides technical assistance to the State Units on Aging, and Aging and Disability Resource Centers.

The study group identified survey⁷ topic areas, selected the states to survey, and provided feedback on survey questions.

Survey of Eight States’ Abuse/Neglect Response Systems

Georgia, Indiana, Massachusetts, Missouri, North Carolina, New Mexico, New Jersey, and Washington State participated in the 66-question survey. The survey requested information regarding the states’ investigation/protection systems, statutes, and processes in private residences and community residential settings.

Consultant Maria Greene performed post-survey telephone interviews for additional information that the group requested, including standards of promptness for investigations, predetermined criteria for acceptance of reports of abuse, neglect, exploitation, client assessment tools, definitions of cases, substantiation of cases and substantiation rates, correlation between recidivism rate and case management, training, and penalties for mandated reporters who fail to report.⁸

Ms. Greene submitted an Interim Report and Final Report on survey results and produced a list of recommendations for the improvement of Washington State’s adult protection system:

1. Develop APS case management for at-risk, vulnerable adults living in the community:
 - a. Implementation of time limited, specific case management for at-risk adults

⁶ NASUAD, founded in 1964, provides leadership in the promotion of social policy regarding older adults and individuals with disabilities on the national level for 56 designated state and territorial agencies on aging.

⁷ Please see *Final Report of Survey of Eight States’ Adult Protection System* in Appendix for the complete survey development process.

⁸ Ibid, p.4, Appendix.

- b. Broader expansion of case management for at-risk adults when resources become available
 - c. May apply for a Medicaid Targeted Case Management Waiver from CMS
- 2. Furnish APS staff with assessment tools.
- 3. Centralize the intake and referral operations for the reporting of adult abuse, neglect and exploitation:
 - a. Upgrade IT systems of APS and RCS for data sharing
 - b. Upgrade phone system for centralized intake and referral operations
 - c. Time study to determine the number of intake and referral staff needed for the centralized intake and referral operations
 - d. RCS should track client recidivism data
- 4. Expand specialized training for APS and RCS and develop specialized training for community partners:
 - a. Partner with universities to develop training curricula
 - b. Offer specialized training on adult abuse, neglect, and exploitation to community partners
- 5. Develop financial and medical forensics resources:
 - a. Hire expert financial and medical forensics
 - b. Partner with community partners who have forensics staff
 - c. Pursue grants
 - d. Develop model teams to address specific problems (i.e., Massachusetts' sexual assault team)
 - e. Designate current staff forensics specialists as a shared resource for APS and RCS
- 6. Improve standards of promptness:
 - a. Same or similar standards of promptness for investigations by APS and RCS
 - b. Financial resources available for protection staff to be able to meet the immediate needs of a victim in emergency situations
- 7. Amend statutes and/or administrative policies:
 - a. Develop administration of a central registry for the maintenance of persons found guilty of abusing, neglecting, and/or exploiting an adult regardless of where the victim was residing; qualified aides seeking employment; and criminal records background checks
 - b. Amend victims' rights statutes to include a clear statement that victims and witnesses shall be treated with fairness and dignity
 - c. Provide in statute that all victims and witnesses shall be accorded all accommodations needed for each person's full participation in the judicial process

The Final Report of Survey of Eight States' Adult Protection System included a comparison analysis of the laws regarding mandated reporting of adult abuse and sanctions for not reporting, and victim rights.

Survey of Advocacy Groups

For a comprehensive analysis of the survey's eight states' adult protection systems the study group conducted a brief, seven question survey of select advocacy groups in New Jersey, Massachusetts, Wisconsin (Wisconsin did not compete the eight states' survey), Indiana, Missouri, Washington, North Carolina, and Georgia.⁹ Groups surveyed included Ombudsman programs, a Board on Aging and Long-Term Care, and an Independent Living Center. Survey questions included what advocacy groups identified as the 'best practice' of their state's adult protection systems services readily available to victims of abuse and neglect, and whether their state had a 'victims bill of rights' in statute. The survey indicated a wide variance in responses attributed to levels of resources available in the state or uncertainty of existing resources.

Some best practices cited included:

- Missouri – Use of Victims of Crime Act funding by the Ombudsman Office for follow-up with victims in long-term care facilities to confirm they are getting adequate services
- Massachusetts – Annual training for all levels of long-term care facility staff
- Indiana – The APS program is located within the criminal justice system, promoting a close relationship between the program and prosecutors.

Funding

The study group reviewed possible funding sources for improving Washington State's adult protection system as well as resources available from their own community agencies or programs. The group identified three major funding avenues:

- Legislative funding
- Grants, such as those funded by the Department of Justice, and
- The Elder Justice Act (EJA), Subtitle H of the Patient Protection and Affordable Care Act, to the extent the act is funded

Demonstrating the importance of the EJA for the improvement of national adult protection programs, the study group submitted a letter to Secretary Dreyfus requesting Washington State's advocacy to fund the EJA at the national level.

Draft Recommendations

On August 26, 2010, the group analyzed and prioritized recommendations from the Survey Report and their own list. The members highlighted their top recommendations for initial consideration and preserved the other recommendations for future consideration. For each recommendation, the group

⁹ *Protective Services Questions for Organizations in Other States*, Appendix

identified the action required for implementation, i.e., funding, statute/policy changes, advocacy, and other resources.

The group presented their top recommendations to Secretary Dreyfus in a meeting on September 9, 2010. The group added two items to the top recommendations list following the group discussion with the Secretary. The first is a recommendation for improved linkages between APS, RCS and law enforcement. The second is a recommendation for an ongoing coalition to continue the work of the group and assure accountability related to the efforts of the study group.

Abuse/Neglect of Adults who are Vulnerable Study Group's Top Final Recommendations

The study group synthesized and prioritized recommendations developed over six meetings and included information from a survey of eight states' adult protection systems and advocacy groups, for initial consideration to improve Washington State's abuse/neglect response system. The study group also identified the statutory, policy, funding, and other resources required for implementing the recommendations.

Recommendation #1

Replace and integrate the antiquated APS/RCS databases to improve accuracy, accountability, program and individual outcome tracking, and information sharing.

Policy, action, and resources required: Funding for a comprehensive, integrated, electronic investigative complaint intake and management system for all settings (APS in-home investigations, RCS adult family home, nursing facility, boarding home, facilities for persons with developmental disabilities, and certified community residential services and support).

APS and RCS each maintain separate databases. They are currently working with antiquated automated intake, documentation and database systems that do not support comprehensive data collection and reports imperative to program management and improvement. RCS cannot trend or track critical allegations of abuse and neglect across systems and resident/client living situations. Most trend data must be hand-tabulated. The inadequate system has limited the effectiveness of analysis of compliance patterns for long-term care and licensed and certified providers. The electronic system, developed in 1996, is unreliable and at risk of failure.

The APS Automated System (ASPSA) was implemented in mid-2000. Due to financial constraints, the system has not evolved with the changes in the APS program and needs significant upgrades to adequately measure program performance. Although the system can produce some trend data, often such data must be hand-tabulated.

The study group believes that a single, comprehensive, integrated, and reliable automated system is vital for effective analysis of APS/RCS program performance. The system should have the capacity to produce allegation trends across settings, target population demographics, coordination with community partners including law enforcement, investigation and victim outcomes, and data to communicate to legislators and the public an accurate accounting of the incidence of abuse,

abandonment, neglect, self-neglect, and financial exploitation of adults who are vulnerable and the protections needed.

Recommendation #2

For investigations to be effective, they must be timely, thorough, and person-centered. The response system needs additional complaint investigators and access to medical and financial forensic expertise.

Policy, action, and resources required: Funding for investigators; linkages and identification of resources for medical and forensic expertise.

Like other states, ADSA's adult protection system is experiencing a steady increase in reports of abuse, abandonment, neglect, self-neglect, and financial exploitation of adults who are vulnerable. In 2009, RCS received 22,309 reports about abuse, abandonment, neglect, and financial exploitation in community residential settings (AFH, BH, NF, SL, ICF/MR). APS received 14,477 such reports of mistreatment of adults who are vulnerable living in their own homes. Of the 14,477 reports, 32% involved allegations of financial exploitation, 28% self-neglect, and 22% involved allegations of neglect. APS is experiencing an average increase of 5% in reports each year.

The types of reports the system receives are increasingly complex. Financial exploitation investigations involve complex accounting and investment scams needing the education and experience of forensic accountants. Older adults and people with disabilities dependent upon others for environmental and physical care find their health compromised by neglectful actions, or experience sexual or physical abuse by their caregivers. Access to forensic accounting and medical professionals would provide the expertise necessary for these complex investigations.

ADSA's adult protection system, already resource-stretched, is challenged to maintain current response timelines with a steady increase in reports of mistreatment. Timely and thorough completion of open investigations is also compromised. The system requires additional investigators to meet the growing demand.

Recommendation #3

The first line of defense against abuse, neglect, or exploitation is to ensure that potential victims know how to respond to such abuse, feel confident in what they can do, and know that they will not be further victimized by reporting the problem. Developing legislation and, where necessary, regulations that address victim rights and educating adults who are vulnerable about their rights is crucial to reducing abuse, neglect, and exploitation.

Policy, action, and resources required: Create victims' rights language in statute/policy; procedure change to inform victims/client of their rights; expand community partnerships; public education campaign.

Many victims remain in abusive situations because of the lack of knowledge regarding services, community programs, protection systems, and other actions they can initiate to protect their health and safety and avoid or be free from further abuse.

The purpose of legislation is twofold: (1) a list of 'victim rights' in statute informs potential victims of their rights and their entitlement to be free of abuse, and empowers them to exercise these rights; and (2) educates the public to better understand a 'victim's perspective' and that people considered 'vulnerable' by statute are entitled to be free of abuse.

Recommendation #4

Develop training on abuse identification, prevention, risk reduction and response for incident response. Training should be provided to mandated reporters, oversight entities (law enforcement, APS, RCS, etc.), individuals who are vulnerable, families, service providers, and to the community at-large.

Policy, action, and resources required: Funding for curriculum and protocol development.

Informed and well-educated communities are crucial to the identification, prevention, investigation, and prosecution of incidents of abuse, abandonment, neglect, self-neglect, and financial exploitation of adults who are vulnerable:

- Potential victims must be informed to recognize abuse and neglect and be empowered to seek actions.
- Law enforcement must recognize signs of abuse to expedite response, realize the value of victims as witnesses, and increase the prosecution of such acts.
- Government and other entities authorized to investigate allegations of abuse need ongoing training in investigation methods, interviewing skills, and protective services implementation.
- Service providers and those providing supports to adults who are vulnerable must recognize what behaviors constitute abuse and neglect, and know who to contact if abuse is occurring and how to reduce the risk that abuse will continue or occur again.
- **Every citizen** plays a *vital role* in the prevention and identification of the abuse and neglect of adults who are vulnerable. ANY community member, who makes the call to law enforcement or APS/RCS, brings the abuse to light and helps to keep a potential victim safe.

Recommendation #5

Make resources available to meet immediate needs for housing and in-home supports in emergency situations. Establish linkages to resources.

Policy, action, and resources required: Funding for housing and in-home services.

Current emergency housing resources are scarce for adults who are vulnerable who need to leave their own homes because of abuse or environmental hazards. Most domestic violence shelters do not accommodate people with care providers or those with accommodation needs. With adequate, temporary in-home support resources, some victims may not need to leave their homes.

ADSA has limited funding to assist adults who are vulnerable with emergency housing. There is no current funding for emergency prescription medicines, heat/water restoration, replacement of broken glasses, and other needs that arise in situations of risk, as some other states provide.¹⁰

Recommendation #6

Institute time-limited case management based on a person-centered risk assessment and safety plan.

Policy, action, and resources required: Funding to identify and implement a risk assessment and safety tool; funding for specialized case managers.

In her research of eight states' adult protection systems, Maria Greene found that, "states that provide either limited or ongoing case management have strong opinions that the provision of case management decreases the potential for their clients to be victimized again."¹¹

APS caseloads consist of complex, time-intensive investigations, forcing a concentration of resources on the investigative and provision of services aspects for immediate protection remedies. APS does not have funding for case management activities for stabilizing and sustaining the victim's health and safety in the community living environment, crucial in preventing recidivism.

APS does not currently have a risk assessment tool. Although, APSAS contains a 'safety screen', the system does not contain a standardized, analytical component assessing the overall safety risk to the victim.

¹⁰ Final Report of Survey of Eight States' Adult Protection System, p. 17, Appendix

¹¹ Ibid, p. 7, Appendix

Recommendation #7

Strengthen the connection between RCS/APS and law enforcement by establishing protocols for the referral and updating of information between the entities in order to enhance information sharing and consistency, and to ensure compliance with statutory requirements that all cases that may be criminal are reported to law enforcement.

Policy, action, and resources required: Policy development.

Strengthening the coordination and collaboration and referral processes between law enforcement and RCS/APS will improve investigative and protective actions by all entities and will likely increase the prosecution of crimes against adults who are vulnerable.

Recommendation #8

Creation of a statewide coalition comprised of stakeholders in the adult abuse/neglect response system (e.g., long-term care ombudsman, Medicaid Fraud Control Unit, Disability Rights Washington, DSHS, DOH, etc.) to support the accountability of all systems involved related to the efforts of the study group, and to assess the need for other reforms.

Policy, action, and resources required: Funding for facilitator; policy change.

The safety and protection of adults who are vulnerable in Washington State are the responsibility of a community of governmental entities, law enforcement, advocacy groups, service providers, and citizens. Diminishing resources and a growing population require ongoing analysis of barriers and creation of innovative remedies accomplished only by ongoing collaboration with community partners.

Additional Recommendations for Future Consideration

The Abuse/Neglect of Adults who are Vulnerable Study Group made additional recommendations for future consideration:

1. Create standardized training for law enforcement across the state. Include:
 - a. Department investigative roles
 - b. Vulnerable adult abuse (especially financial exploitation)
 - c. Failure to report is a crime
 - d. Crimes in LTC facilities and in-home, especially criminal mistreatment

Policy, action, and resources required: Funding for curriculum development and trainers.

2. Increase community education and media events to promoting zero tolerance of abuse/neglect against adults who are vulnerable.

Policy, action, and resources required: Publication resources.

3. Increase and improve reporting by RCS to law enforcement.
 - a. Standardize a referral form
 - b. Recommend that DSHS investigators to include the designated priority of a case when making a law enforcement referral
 - c. Immediate referral of all reports alleging neglect, criminal mistreatment, and theft
 - d. Immediate reporting of additional information
 - e. Forward all outcome reports to law enforcement

Policy, action, and resources required: Policy change.

4. Propose civil remedies and expand range for sanctions for those mandated reporters who fail to report.

Policy, action, and resources required: Statute change.

5. Develop legislation to require mandated reporters to report directly to law enforcement as well as the department for increased timeliness of reporting and expand the list of mandated reporters to include clergy, funeral directors, notaries, and financial institution employees.

Policy, action, and resources required: Statute change.

6. Develop a single standard for complaint responses that includes prioritization and response times; consider a centralized intake system.

Policy, action, and resources required: Funding for structural changes; policy changes; staffing resources.

7. Furnish protective services staff with assessment tools.

Policy, action, and resources required: Funding to develop tools; research of existing tools; policy change.

8. Improve timeliness of investigations. Improve response times for reports prioritized as emergencies.

Policy, action, and resources required: Funding for additional investigators; policy change.

9. Make information about caregiver qualifications easily accessible to adult Medicaid and non-Medicaid recipients.

Policy, action, and resources required: Funding for website development.

10. Reconsider the permanency of names on the abuse registry; create a range of timelines.

Policy, action, and resources required: Convene a workgroup; policy and WAC change.

11. Address the victim credibility gap through training of administrative law judges and superior court judges. Consider:
 - a. Training on the provision of reasonable accommodations from the first contact with the victim
 - b. Build a list of expert witnesses
 - c. Develop a pool of expert witnesses and advocates

Policy, action, and resources required: Funding for curriculum development, staffing, and statewide training.

12. Outreach to prosecutors in rural areas to treat crimes against elders and people with disabilities with equal priority (e.g., financial exploitation situations).

Policy, action, and resources required: Funding (grants); advocacy.

Appendix

Charter

ADSA Organization Chart

Washington State – Final Report of survey of Eight States' Adult Protection System

Appendix -- 1

Appendix -- 2

Washington State – Final Report of survey of Eight States' Adult Protection
System: Interim Report

Protective Services Questions for Organizations in Other States